



Council, Committee or Workgroup Meeting Snapshot

Meeting: Quality Improvement (QI) Council

Meeting Date: 10/26/2023 9:00-11:00

| Attendees: | | KEY DISCUSSION TOPICS |
|--|---|---|
| <ul style="list-style-type: none"><input checked="" type="checkbox"/> MSHN – Sandy Gettel<input checked="" type="checkbox"/> BABH –Sarah Holsinger<input checked="" type="checkbox"/> CEI – Elise Magen<input checked="" type="checkbox"/> CEI – Shaina McKinnon<input checked="" type="checkbox"/> CEI – Bradley Allen<input checked="" type="checkbox"/> CEI – Kaylie Feenstra<input checked="" type="checkbox"/> Central –Kara Laferty<input checked="" type="checkbox"/> GIHN –Taylor Hirschman<input checked="" type="checkbox"/> GIHN – Pam Fachting<input checked="" type="checkbox"/> Huron – Levi Zagorski | <ul style="list-style-type: none"><input checked="" type="checkbox"/> Lifeways –Phillip Hoffman<input checked="" type="checkbox"/> MCN – Sally Culey<input checked="" type="checkbox"/> MCN- Joe Cappon<input checked="" type="checkbox"/> Newaygo – Andrea Fletcher<input checked="" type="checkbox"/> SCCMH Saginaw-Holli McGeshick<input checked="" type="checkbox"/> SCCMH-Bo Zwingman-Dole<input type="checkbox"/> SHW<input checked="" type="checkbox"/> TBHS – Sheila Canady (Temp)<input checked="" type="checkbox"/> The Right Door- Susan Richards<input checked="" type="checkbox"/> The Right Door –Jill Carter<input checked="" type="checkbox"/> MSHN-Dan Dedloff-Kim Zimmerman | <ol style="list-style-type: none">1. Review & Approvals2. Consent Agenda3. Performance/Process Improvement4. Annual Planning5. Standing Agenda Items October Meeting Packet |

| | |
|--|--|
| | <ol style="list-style-type: none">1) Review & Approvals (9:00)<ol style="list-style-type: none">a. September 28th, QIC Snapshot. Agenda approvedb. No additions to the agenda2) Consent Agenda-Consent agenda approved. No discussion<ol style="list-style-type: none">a. HSAG PMV Reportb. PIP #1 Access-Reduction or Elimination of Disparity between the Black/African American and White Population Group. FY23Q3 Performance Summary.c. MMBPIS FY24 Code Book3) Performance/Process Improvement-(9:05)<ol style="list-style-type: none">a. Customer Services Inquiry for October meeting related to Cultural Competency Requests. Dan Dedloff and Kim Zimmerman provided background for the Cultural Competency Request that the CSC was charged with developing. Customer Service Reps were in attendance for the discussion. Concerns addressed were the administrative burden of the request for quarterly data, difficulty in obtaining data that is existing throughout an established process, difficulty in understanding the purpose of the deliverable. Suggestions were for the PIHP and CMHSPs to review the current Provider Directory to ensure information is provided to support cultural differences, such as: interpreter, other language when needed, support for varying disabilities etc. Utilize current policy and training for evidence of staff knowledge, staff competence can be demonstrated through the utilization of the PCP process to identify cultural needs/individual’s beliefs. Consumer satisfaction and confirmation of staff knowledge/lack of knowledge can be demonstrated through complaint process/data and consumer satisfaction survey process. Kim and Dan will discuss modifications needed and bring back to CSC/QIC. |
|--|--|

| | |
|----------------------------|---|
| | <ul style="list-style-type: none"> b. Critical Incident Reporting (CIR)- FY23 Critical Incident Performance Monitoring-Performance indicates a decrease in the rate of critical incidents. Natural Cause Deaths/unknown should be reported as Death of Unknown Cause. Overdose is only an SUD allowable event. CMHSPs should resubmit to let Sandy know to update it in the CRM. Concern continues to be expressed related to the discrepancies of the MDHHS Contract and the expected action related to critical incidents. c. MMBPIS Performance Summary-Continue to implement interventions based on CMHSP performance. Question-Is a nonbillable service (screen-formerly used H0002) allowed for a face-to-face services by a professional following a hospital discharge. The codebook does not specify billable or not. Consensus of the group was that based on the intent of the indicator it could be used, ensuring a process is in place to verify that a professional did provide the service face to face. d. Consumer Satisfaction Survey Reports-MHSIP, YSS. FY23. The domains of social connectedness, outcomes, and social functioning did not meet the standard of 80%. Each CMHSP will be reviewed internally. QIC in collaboration with CLC will identify action steps to improve areas below 80%. The consumer advisory council indicated that face-to-face was the preferred methodology for distribution. This will be considered when discussing the distribution method of FY24. <p>4) Annual Planning</p> <ul style="list-style-type: none"> a. QIC Charter-Reviewed and approved Charter with no changes. Discussed the option of CCBHC and BHH QI being incorporated into the meeting as needed instead of BHH meeting on different day. No issues identified. Will discuss with BHH QI subgroup this month. b. QIC Annual Report-Reviewed and approved the QIC Annual Report with edits. <p>5) Standing Agenda Items/Open Discussion-</p> <ul style="list-style-type: none"> a. MDHHS QIC Updates -Briefly reviewed the MDHHS plan for changes to the Quality Management program including the performance measures. b. Site review updates/reports – CMHSP inquired about the status of the use of ranges. Discussion of how many have discontinued the use of ranges occurred. A request was made for information of the final ruling by MDHHS on the appeal for the citation issued by the MDHHS Federal Compliance Site Review Team. c. BH-TEDS Updates-(Hollis)-No discussion d. National Core Indicator: No updates, deferred to November. e. Other |
| ACTION STEPS | <ul style="list-style-type: none"> • Kim/Dan discuss and modify cultural competency request process and share with CSC/QIC. • CMHSPs update critical incident submissions and complete remediation forms if applicable. 11/17/2023. • PIHP to schedule lunch and learn regarding the critical incident remediation, follow up with MDHHS on contract changes needed for critical incident reporting. 11/17/2023 • CMHSP review satisfaction survey results and identify causal factors and interventions. 11/30/2023. |
| KEY DATA INTS/DATES | <ul style="list-style-type: none"> • MDHHS QIC December 6th 10-12 • Improving Outcomes Conference December 7-8 • QIC November 16th 10:30-12 |

| Name (Original Name) | User Email | Duration (Minutes) | QIC | CSC | CCBHC |
|---------------------------------------|---|--------------------|-----|-----|-------|
| Andrea Fletcher | afletcher@newaygocmh.org | 123 | x | | |
| Bo Zwingman-Dole | | 190 | x | | x |
| Bradley Allen (He/Him) | allenb@ceicmh.org | 151 | x | | |
| Carly Coxon - LifeWays | | 145 | | x | |
| Chris Singer - Lifeways | | 68 | | | x |
| Dan Dedloff | dan.dedloff@midstatehealthnetwork.org | 52 | | x | |
| Elise Magen | magen@ceicmh.org | 188 | x | | x |
| Emily Shaffer | | 20 | | x | |
| Emily Walz, LifeWays | | 32 | | | x |
| Holli McGeshick | hmcgeshick@sccmha.org | 189 | x | | x |
| Holly Jenkins - LifeWays | | 30 | x | | |
| Jason Manley (he/him) | | 68 | | | x |
| Jill Carter | | 189 | x | | x |
| Joe Cappon - MCN | | 149 | x | | |
| Joseph Wager | joseph.wager@midstatehealthnetwork.org | 38 | | | x |
| Joshua Williams | | 71 | x | | |
| Joyce Tunnard | | 55 | | x | |
| Kara Laferty | klaferty@cmhcm.org | 150 | x | | |
| Katy Hammack | katy.hammack@midstatehealthnetwork.org | 32 | | | x |
| Kaylie Feenstra | | 150 | x | | |
| Kim Zimmerman | kim.zimmerman@midstatehealthnetwork.org | 63 | | x | x |
| Kristy - Access Center | | 52 | | x | |
| Levi | | 153 | x | | |
| M. Prusi - RR | | 52 | | x | |
| Martie Callow-Rucker | | 32 | | | x |
| Melissa Gutzwiller - SCCMHA | | 58 | | x | |
| Milessa Leach - Montcalm Care Network | | 49 | | x | |
| mtaylor | | 59 | | x | |
| Pam Faching | pfaching@gihn-mi.org | 94 | | x | |
| PJ Hoffman | | 79 | x | | |
| Sally Culey-Montcalm Care Network | | 55 | x | | |
| Sandra Gettel | sandy.gettel@midstatehealthnetwork.org | 191 | x | | x |
| Sarah Holsinger | | 151 | x | | |
| Shaina McKinnon (she/her) | mckinnon@ceicmh.org | 150 | x | | |
| Sheila-TBHS | | 130 | x | | |
| Stacy FoxElster (she/her) | | 70 | | | x |
| Susan Richards | | 184 | x | | x |
| Taylor Hirschman- GIHN | | 131 | x | | |